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reliancegeneral.co.in 1800 3009

Reliance Commercial Vehicles (GCV Other than 3 Wheelers Public) Package Policy- Schedule

Policy Number:	607321923340001191	•	Proposal/Covernote No:	R03021915117		
Insured's Name : MRS. URMILA NANDA Y	ENDARKAR	Period of Insurance: From 15:56 Hrs on 03-Feb-2019 to 23:59 Hrs of 02-Feb-2020				
AT POST MOKASHPADA GAON MUMBRA, PANVEL RD NR KHOT BANGALA BUS STOP MOKASHIPADA GAON DAHISAR THANE,			Policy Servicing Branch: RELIANCE GENERAL INSURANCE CO LTD RELIANCE CENTRE, SOUTH WING, 4TH FLOOR, OFF. WESTERN EXPRESS HIGHWAY, SANTACRU (EAST), MUMBAI- 400055 MAHARASHTRA			
Mobile No : 9834486295			Tax Invoice No. & Date : F	R03021915117 & 03/02/2019		
Email-ID : swamiservi	ces9@gmail.com		GSTIN/UIN of the Insured	:		
Insured Vehicle Details						
Registration No.	MH43E3290		Mfg. Month & Year		JAN-2005	
Make / Model & Variant	Tata/1109 & Lpt		CC / HP		2000	
Engine No. / Chassis No.	22065/25030		LCC Including Driver		2	
Type of Body	NA		GVW	119		
RTO Location	MAHARASHTRA - Navi Mumbai		Total Premium ₹	30115		
Carrier Type	Public		IDV ₹			
Manufacture fully build in	Yes		Hypothecation/Lease			
Vechile Sub Class	Truck		Goods Type	Non Hazardeous		
Insured's Declared Value	(IDV)					
Chasis IDV ₹		0.00	Non Electrical Accessories	₹	0.00	
Body IDV ₹		0.00	CNG / LPG Kit ₹		0.00	
Vehicle IDV ₹		335498.00	Trailer / Side Car ₹		0.00	
Electrical / Electronic Acce	ssories ₹	0.00	Total IDV ₹	335498.00		
Premium Summary						
Own Damage - Section I		Amount (₹)	Liability - Section II		Amount (₹)	
Basic OD		2127.73	Basic Liability (TPPD 1)		24190.00	
• •	ubes Mudguards/Bonet/Side		Total Basic Liability Prem	nium	24190.00	
parts etc (IMT-23)	o Promium	319.16 2446.89	PA Benefits - Section III PA Cover to paid driver, Cleaners & Conductors			
Total Basic Own Damag TOTAL OWN DAMAGE F		2446.89	(IMT - 17)	and a Conductors	120.00	
			Total PA Premium		120.00	
			TOTAL LIABILITY PREMI	UM	24310.00	
			TOTAL PACKAGE PREMI		26757.00	
			CGST on OD Premium (@9	· ·	220.00	
			SGST on OD Premium (@9 CGST on TP Premium (@6.		220.00 1459.00	
			SGST on TP Premium (@6.		1459.00	
TOTAL PREMIUM PAYAB	LE (₹)		, i		30115.00	
		Cubiast	to I M T Endt Nos. 9 Mamara	ndum printed/herein/attached h	INAT 47 02 04	

Subject to I.M.T.Endt.Nos. & Memorandum printed/herein/attached hereto.IMT 17,23,21

GSTIN: 27AABCR6747B1ZG, HSN: 9971

Description of services : Motor vehicle insurance services

Consolidated Stamp duty Paid vide Letter of Authorisation No. CSD/298/2019/143/19 dated 11th Jan 2019**Not Applicable for the State of J&K

557563120014	Rajesh Haribhau Wagh	NA	9922435902
VLE ID	VLE Name	UIN	VLE Contact Number





11CSC001 / Csc Egovernance

Intermediary E-mail ID Intermediary Code/Name Intermediary Contact No.

Limits of Liability

PA cover for owner driver under section III CSI ₹ 0.0 /-.
(a) Under Section II (1)(i) of the Policy-Death of or bodily injury to any person so far as it is necessary to meet the requirements of the Motor Vehicle Act, 1988. (b) Under Section II (1)(ii) of the Policy-Damage to property other than property belonging to the insured or held in trust or in the custody of control of the insured up to the limits specified - (TPPD1 Sum

Insured- ₹ 7,50,000/- ,TPPD2 Sum Insured - ₹ 6,000/-)

The policy covers the use only under a permit within the meaning of Motor Vehicle Act, 1988 or such a carriage falling under Limitations as to use

sub-section (3) of Sec 66 of the Motor Vehicle Act, 1988. The Policy covers use for any purpose other than: (a) Organized

racing (b) Pace making (c) Speed testing (d) Reliability trials.

Persons/Classes of persons

entitled to drive

Any person including insured:

Provided that a person driving holds a valid driving license at the time of the accident and is not disqualified from holding or obtaining such a license. Provided that the person holding a valid learner's license may drive the vehicle when not used for the transport of goods at the time of the accident and that such a person satisfies the requirements of Rule 3 of the Central

Motor Vehicles Rules, 1989.

Deductible under Section-I : (i) Compulsory deductible ₹ 1000.0/- (ii) Additional compulsory deductible ₹ 0/- (iii) Voluntary deductible ₹ 0.0/-

Compulsory PA cover for owner driver:

Insured is not eligible for the Compulsory PA cover for owner driver in this policy as the same has not been opted for the reasons allowed as per motor tariff and relevant circulars/notifications issued by the regulator in this regard.

In case you have missed it, please opt for the compulsory PA cover by payment of an additional premium of Rs. 750/-. Liability of insurance company shall commence from the date of issuance of endorsement.

I/ We hereby declare that I/ we do not hold a valid Motor Driving license, and I/We am/are aware that Compulsory Personal Accident covering Death & Permanent Disability (Total and Partial) for Owner-Driver of SI 1500,000 will not be applied to this policy.

"It is hereby declared and agreed that all pre-existing damages to the vehicle having occured prior to the commencement of cover are excluded from the scope of the

The NCB provided is on Basic OD Premium excluding Add-on wherever applicable. The policy wording with detailed terms, conditions and exclusions are available on our website www.reliancegeneral.co.in

I/We hereby certify that the Policy to which the certificate relates as well as this certificate of insurance are issued in accordance with the provision of Chapter X and Chapter XI of M.V. Act, 1988.

*No Claim Bonus is subject to no claim on the previous policy. Benefits under the policy stands forfeited if claim is/was made in previous policy.

Note: In the event of dishonor of cheque, this policy document automatically stands cancelled from inception irrespective of whether a separate communication is sent or not.

No Claim Bonus will be allowed, provided the policy is renewed within 90 days of the expiry of the previous policy.

Safeguard your transaction by paying your premium via crossed cheque/DD in favour of Reliance General Insurance Co. Ltd.

The policy has been issued based on the information provided by you and the policy is not valid if any of the information provided is incorrect. Subject otherwise to the terms, conditions and exclusions of the Reliance Goods Carrying Vehicle Package Policy Certificate Cum Policy Schedule. In witness whereof this Policy has been signed at Mumbai on policy tax invoice date in lieu of Proposal/Covernote No. as mentioned in the policy.

This document shall be trated as a Tax Invoice as per Rule 9(2) of the Goods and Services Tax Invoice Rules

Updating Registration Number of vehicles within 15 days of policy inception is MANDATORY as per IRDA. Kindly provide the same to your Agent/Our Call centre/Policy issuing Branch (Applicable for policies booked without Registration No of vehicles).

IMPORTANT NOTICE: The insured is not indemnified if the vehicle is used or driven otherwise than in accordance with this Schedule. Any payment made by the Company by reason of wider terms appearing in the Certificate in order to comply with the Motor Vehicle Act, 1988 is recoverable from the Insured. See the clause headed AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY'. For legal interpretation, English version will hold good.

In case of a renewal, the benefits provided under the policy and/or terms and conditions of the policy including premium rate may be subject to change.

Grievance Clause: For resolution of any query or grievance, Insured may contact the respective branch office of the Company or may call at 1800 3009 or may write an email at rgicl.services@relianceada.com. In case the insured is not satisfied with the response of the office, insured may contact the Nodal Grievance Officer of the Company at rgicl.grievances@relianceada.com. In the event of unsatisfactory response from the Nodal Grievance Officer, insured may email to Head Grievance Officer at rgicl.headgrievances@relianceada.com. In the event of unsatisfactory response from the Head Grievance Officer, he/she may, subject to vested jurisdiction, approach the Insurance Ombudsman for the redressal of grievance. Details of the offices of the Insurance Ombudsman are available at IRDAI website www.irda.gov.in or on company website www.reliancegeneral.co.in or on www.gbic.co.in. The insured may also contact the following office of the Insurance Ombudsman within whose territorial jurisdiction the branch or office of the Company is located.Office of the Insurance Ombudsman,3rd Floor,Jeevan Seva Annexe,S. V. Road,Santacruz (W), Mumbai - 400 054. Tel.: 022 - 26106552 / 26106960 Fax: 022 - 26106052 Email: bimalokpal.mumbai@gbic.co.in | Shri. A. K. Sahoo Office of the Insurance Ombudsman,Jeevan Darshan Bldg.,3rd Floor,C.T.S. No.s. 195 to 198,N.C. Kelkar Road,Narayan Peth, Pune – 411 030. Tel.: 020-41312555 Email: bimalokpal.pune@gbic.co.in

Note: Kindly acknowledge the receipt of this policy. In case you find any variations against your proposal or any discrepancy in the policy, kindly contact us In the unfortunate event of a claim, please call quoting your Policy No. on 1800 3009 (toll free) and register your claim immediately within 7days from the date of loss

In the absence of any communication from you within a period of 15 days of receipt of this letter, we will consider that the issued policy is in order and as per your proposal.

Special Conditions: NA

Policy has been issued with reference to vehicle inspection report, reference lead no. 19140422 & special conditions. The inspection report remarks can be viewed on company's website by the lead no.

For Reliance General Insurance Co. Ltd.

Authorised Signatory

An ISO 9001:2008 Certified Company

Reliance General Insurance Company Limited. IRDAI Registration No. 103.

Registered Office: H Block, 1st Floor, Dhirubhai Ambani Knowledge City, Navi Mumbai 400710.
Corporate Office: Reliance Centre, South Wing, 4th Floor, Off. Western Express Highway, Santacruz (East), Mumbai - 400 055.
Corporate Identity No.U66603MH2000PLC128300.RGI/MCOM/CO/GCV/PS/Ver. 1.3/310118

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Risk Assumption Letter

Dear Mrs. URMILA NANDA YENDARKAR

Thank you for choosing Reliance General Insurance.

Please find enclosed policy no.: 607321923340001191 which has been issued based on the details declared by the applicant.

Insured Vehicle Details	sured Vehicle Details						
Registration No.	MH43E3290	Mfg. Month & Year	JAN-2005				
Make / Model & Variant	Tata/1109 & Lpt	CC / HP	2000				
Engine No. / Chassis No.	22065/25030	LCC Including Driver	2				
Type of Body	NA	GVW	11990				
RTO Location	MAHARASHTRA - Navi Mumbai	Total Premium ₹	30115.00				
Carrier Type	Public	IDV ₹	335498.00				
Manufacture fully build in	Yes	Hypothecation/Lease	NA				

Insured's Declared Value (IDV)						
Chasis IDV ₹	0.00	Non Electrical Accessories ₹	0.00			
Body IDV ₹	0.00	CNG / LPG Kit ₹	0.00			
Vehicle IDV ₹	335498.00	Trailer / Side Car ₹	0.00			
Electrical / Electronic Accessories ₹	0.00	Total IDV ₹	335498.00			

YOU HAVE OPTED FOR THE FOL	LOWING COVERS					
Standard Cover	Vehicle Own Damage + Third Party Coverage					
	Electrical/electronic accessories					
	Non-electrical accessories					
	Bi-fuel kits comprising LPG/CNG systems					
Add-on Covers						
Nil Depreciation Cover	No deduction for depreciation on vehicle parts other than tyres and tubes with respect of approved partial loss claims.					
Additional towing Charges	Provides cover for towing charges over and above the standard policy guideline as per the cover opted by customer (Sum Insured - $\stackrel{?}{\stackrel{?}{$\sim}}$ 0.0/-).					

Please take a moment to carefully check your policy details mentioned above and in the policy schedule. Kindly confirm that the same are in order. In case of discrepancies, please let us know immediately. You can write to us at rgicl.services@relianceada.com or call us on 1800 3009 (toll free) for necessary changes/rectification. In the absence of any communication from you within a period of 15 days of receipt of this letter, we will consider that the issued policy is in order and as per your proposal. Non disclosure and/or misrepresentation of claims in the previous policy period can lead to cancellation of your policy or rejection of your claims.

For Reliance General Insurance Co. Ltd.

Authorised Signatory

Reliance General Insurance Co.Ltd.

IRDAI Registration No. 103.

An ISO 9001:2008 Certified Company
Registered Office: H Block, 1st Floor, Dhirubhai Ambani Knowledge City, Navi Mumbai 400710
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Know your Policy

Remember to carefully go through the Risk Assumption Letter and confirm your personal as well as your vehicle

In case of any discrepancy in the policy details, kindly revert within 15 days from the policy start date on 1800 3009 (toll free) or visit any of our branches

Kindly refer to the Key Feature Document and Policy Wording at www.reliancegeneral.co.in to understand your policy better and learn more about the policy

What documents do you require for making any change to your Policy

- 1. Changes in vehicle make & model/cubic capacity/seating capacity/engine & chassis no./year of manufacture/registration no./ location/address Letter for change, policy copy and registration certificate copy along with additional premium cheque, if applicable. Documents required:
- 2. Changes in electrical and non electrical accessories/CNG/LPG kit

Letter for addition, policy copy, invoice copy of accessories, endorsed registration certificate copy (for CNG/LPG kit) and cheque for Documents required:

additional premium.

3. Changes in financier details (Hypothecation/Lease/Hire purchase)

Letter for change, policy copy, endorsed registration certificate copy and no objection certificate from financier (not mandatory for deletion, if registration certificate copy is endorsed). Documents required:

How to register a Claim - Cashless



at Network Garage





Claim registration by Network Garage



Survey, Document verification, Loss Assessment & Re-inspection



Cashless Amount Confirmation



Vehicle Delivery

How to register a Claim - Reimbursement



Registration of Claim



Report Vehicle at Garage



Survey, Document verification,Loss Assessment and Re-inspection



Vehicle Delivery



Submission of Original Repair Bills + **Payment Receipt**



Claim Settlement to Customer

What documents do you require to register a Claim

- 1.Claim form duly filled and signed (company stamp in case of company registered vehicles)
- 2.Registration copy
 3.Driving License of the driver at the time of loss
- 4.Policy copy
 5.Vehicle fitness certificate
- 6 Vehicle route permit
- 7. Vehicle carriage permit
- 8.Road tax copy
- 9.Load Challan (if applicable)

Note: 1. As soon as a claim occurs, please intimate immediately at our call centre 1800 3009 (toll free). Delay in intimation would result in the violation of policy

How to renew your policy conveniently



Visit reliancegeneral.co.in and renew online



Call 1800 3009 and renew



Submit a cheque/DD along with signed Renewal Notice to branch/agent and renew

Payment Modes



Internet banking



Cheque/DD



Credit/Debit Card



Proposal Form for Reliance Commercial Vehicles Package Policy (Other than Motor Trade Internnal Risk Policy)

Th	he queries made/details stated le insurer may seek any other in Applicable to all classes of vehic	fromation as desired for	or under for underwriting purp	pose.)	
	PCV	✓ GCV	MISCD	Trailer	
F	or Office Use Only				
	Policy Number			Date	02/03/2019
	Savvion Reference no.			Inspection Lead No.	
In	termediary Details (To be	filled in BLOCK LE	TTERS)		
	Intermmediary Name CSC	EGOVERNANCE		Code	11CSC001
	Branch Name CSC-			Code	6073
		ny Csc Spv Sm		Code	D6073241
D	etails (To be filled in BLOC	CK LETTERS)			
1.	This proposal is for	A New Policy	Renewal of Policy	Rollover Policy	Used
	Proposer's Full Name	Mr. Mrs.	Ms. URMILA NANDA YEND		
2b.	Address	Address fo	r Communication	Address where Ve	chicle is Normally Kept and Used
	Flat/Building/Door/Block No.	At Post Mokashpada	Gaon Mumbra Panvel Rd Nr op Mokashipada Gaon	(2)	
	Road / Street / Sector	Dahisar Thane	op Wordonipada Gaon		
	Nearest Landmark				
	Area				
	City Pin Code	400612			
	State	MAHARASHTRA,			
	Country	India			
	Phone			Mobile 98	334486295
	Emergency Contact No.			Blood Group	
	Email	swamiservice	es9@gmail.com	Fax	
3.	Period of Insurance	From 03/02/2019		To 02/02/20	020
4.	Monthly Income	Business Pr	rofession Salary	Agricultural Income	Savings Others
5.	Source of Funds	upto ₹20,000	₹20,001 to ₹50,000	▼50,001 to ₹100,000	₹1,00,000 and above
6.	UID Aadhaar No.			7. PAN	
D	etails of the Vehicle				
8.	Registration Number	MH43E3290		9. Date of Regis	stration 22-Aug-2005
10.	Registering Authority & Location	on MAHARASHTRA -	Navi Mumbai		
11.	Year & Month of Manufacture	JAN-2005		12. Cubic Capaci	ty 2000
13.	Engine Number	22065			
14.	Chassis Number	25030			
15.	Make of Vehicle	TATA			
16.	Type of Body/Model	Na / 1109		17. Seating Capa	acity including Driver 2
18.	Gross Vehicle Weight(GVW)/C	Cubic Capacity(C.C.)	11990		
19.	Goods Type (Applicable only in	f GVW+7500kgs)	Hazardous	✓ Non Hazardous	

An ISO 9001:2008 Certified Company

IRDAI Registration No. 103. Reliance General Insurance Company Limited. Registered Office: H Block, 1st t Floor, Dhirubhai Ambani Knowledge City, Navi Mumbai - 400710. Corporate Office: Reliance Centre, South Wing, 4th Floor, Off. Western Express Highway, Santacruz (East), Mumbai - 400 055. Corporate Identity Number U66603MH2000PLC128300. Trade Logo displayed above belongs to Anil Dhirubhai Ambani Ventures Private Limited and used by Reliance General Insurance Company Limited under License. RGI/MCOM/CO/MOT-04/COMM-VHCL-PFNer. 1.2/270117.



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20.	20. Is the Vehicle made in India									
21.	1. Max. Licensed carrying capacity (No. of passengers)in case of Passenger carrying vehicles :									
22.	Vehicle Category	Bus	Taxi							
	Vehicle usage type(Applical	ble if bus):	Contract Carriage	Stage Carriage	Private	Usage				
	Vehicle usage subtype(App	licable if Contract Carriage):	School Bus		3					
23.	Seating Capacity (including		Concor Buc	Employee Pickup B	uo Unicis					
D	etails of the Vehicle Type	e and Use								
24.		en by Non-conventional source o	of power? Yes	No If yes	Bi Fuel CN	G ∏LPG				
24.	vinether the veriloie is drive	ı	i power:	1 140 II yes	Birdei Civ	0				
	Insured declared value (IDV) of the Vehicle	Non-electrical Accessories fited to the Vehicle	Electronics Accessories fited to the Vehicle	Side Car(Two_wheeler) Trailer(Pvt.Cars)	Value of CNG / LPG Kit Bi Fuel	Total Value				
	Chassis Body	(₹)	(₹)	(₹)	(₹)	(₹)				
	335498.00	0.00	0.00	0.00		335498.00				
	000 100.00	0.00	0.00	0.00	0.00	000 100.00				
25.	Details of Driver: (a) Age	of Owner Driver		Other						
		er from defective vision or heari	ng or any physical infirmity		Y	es No				
	if "yes" please give	details								
	(a) I lea the driver ever	haan involved for equaing any a	acidant ar laga	0		You No				
	• •	been involved for causing any a details as under including the p			□ '	es No				
	ii yes piease give	details as drider including the p	ending prosecution, if any .							
			(7 ₁							
26.	(d) D.O.B.									
	Add On Covers (Suject to av	vailability and eligibility)								
	(a) Easy Monthly Instalmen	t(EMI) Protection Cover :(RGI-N	MO-A00-0017-V01-14-15)		ΠY	es No				
	If Yes, please chooose	any one option;			_	_				
	Plan I -1 EMI,EMI Amo	unt: ₹	Plan	II -2 EMI,EMI Amount: ₹						
	Plan III -3 EMI,EMI Amo	ount : ₹								
	(b) Additional Towing charge	ges			Y	es No				
27.	Is the vehicle fitted with any	Anti-theft device approved by the	ne ARAI ?		Y	es 🗸 No				
	If Yes,please attach certification	ate of installation in the vehicle,is	ssued by automobile Associa	ation of India.						
28.	Are you a member of Autom	nobile Association of India? If	es,please submit membersl	nip copy.	Y	es 🗸 No				
29.	Whether the Vehicle is used	d for Driving Tuitions?			Y	es 🗸 No				
30.	Whether use of Vehicle is lin	mited to Own Premises?			Y	es 🗸 No				
31.	Wheather the commercial V	ehicle is also for private purpos	es (excluding use for hire or	reward)?	Y	es No				
32.	Are you entitled to No Claim	n Bonus ?			Y	es 🗸 No				
	If Yes, please submit proof	thereof								
33.	Whether the Vehicle is fitted	d with Fibre Glass Tank?			Y	es 🗸 No				
34.	Whether the Vehicle belong	s to the Embassy/Consulate of	a Foreign Country?		Y	es No				
	If so,is the duty element incl	luded in the IDV ?				_				
35.		gn for the use of Blind/Handicap	ped/Mentally Challenged Pe	erson ?		es 🗸 No				
36.	Date of purchase of the Veh				22-Aug-2005					
37.	Whether the vehicle at the t	ime of the purcanse was			New S	econd Hand				
R	isk Inclusion									
38.	Liability to third parties : the	policy provide Third PartyPrope	rty Damage (TPPD) of ₹1 la	kh(Two Wheelers) and ₹7	.5 lakhs(Others clas	ss of vehicles)				
		bove limits to statutory TPPD lia	bilty limit of ₹ 6000/- only ?			∕es ✓ No				
	Do you wish to cover legal list	•								
		eaner (No. of persons)				es No				
	(b). Other employees (No					es No				
	(c). Non-fare paying Pass	enger (No. of persons)				es No				



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39.	D	o you wish to	include persona	al Accidents(F	P.A.) cover for	paid drivers	, cleaner	s,co	nductors?					✓ Yes	No
			me and Capital S for other classes		CSI) opted for t	he maximum	n CSI ava	ailable	per person is	₹ 1Lakh	n in cas	e of Moto	rised Two-	Wheelers	_
40.	Р	ersonal Acci	dent Cover for O	wner Driver. F	Please give de	tails of nomin	nation								
		Name	Name of N	ominee	Age of No	ominee	Name (If No	of th	e Appointee e is Minor)	F	Relation	ship	Add	Iress]
(Not		2. Compulsai	Accident cover for over for over the own	vner driver ca	innot be grante	d where a v	sured of ehicle is	₹0.0 / owne		ny , a pa	rtnersh	ip firm or	a similar b	ody	-
41	A1. Do you wish to include Personal Accident cover Named Persons?												☐ No		
		Name	CSI opted	Name of	Nominee	Age of Nom	inee 1	Name If Nor	of the Appoin ninee is Minor	tee ')	Relati	onship		Address	
42.	Ex	tension of G	eographical Area	l											
١	Νh	ether the ext	ention of Geogra	phical Area to	the following	Countries re	quired?								
		1. Banglade	sh 2. I	Bhutan	3. Maldive	es [4. Ne	pal	5. F	Pakistan		6. Sr	i Lanka		
Г) of	ails of Hiro	Purchase/ Hy	nothocatio	n / L 0250										
									71 3 3					A	
43.			the vehicle is un		Hire pu	rcnase		L	Leaase Agr	eement		Шн	ypotnecati	on Agreem	ient
			ne and address o	or Concerned	Parties.										
44.		ull Name													
45.	Α	ddress													
			e Value (IDV)		cal Accesories	Electrical		ehicle Trailer (Pvt. Cars) LPG № (₹)			of CNG /	Total Va	alue		
		Vehicle assis	Pody		the Vehicle	Fited to t					(₹)			(=)	
Ļ		1	Body	(₹		(₹								(₹)	
(0.00	0	0.00	С	0.00	0	0.00			.00			.00	335498.0	00
N	ote)													
	Th	ne Insured's ommenceme	Declared Value (Int of each policy	DV) of the Ve	ehicle will be de ch insured vehi	eemed to be cle.	the 'SUN	M INS	URED' for the	purpose	of this	tariff and	it will be fi	xed at the	
			vehicle is to be f nt of insurance / r							model a	as the v	ehicle pro	oposed for	insurance	at the
D	eta	ils of Prev	ious Insuranc	9	x 0										
46.	Fι	ull Name of F	Previous Insurer												
47.	Ac	ddress													
48.	Po	olicy Number	•					Pre	evious policy of	expiry					
49.	Ту	pe of Cover		✓ Packag	ge Policy	Lia	ability on	ly	oth	ners (to b	e desc	ribe)			
50.	N	O CLAIM BO	NUS allowed und	der previous p	policy (%)	_			_						
51.	CI	aims taken i	n previous policy											Yes	✓ No
	lf :	yes no. of Cl	aims						Clai	ms Amou	unt ₹				
52.		-	d to no claim bon											Yes	✓ No
	lf :	yes, please s	submit/ attached	proof thereof											
_															
Pay		ent Details													
		Cheque/ DD			Cheque/ DD N	0									
	(Cheque/ DD	Date			Cash		Credit	Card	Others					





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Proposei	's Bank Details						
54. Bank	of the Bank Account Ho Account Number of the Bank	older	55.	Account:	Saving	Current	
57. Branc 58. MICR	Code (9 digit MICR co	de number of bank and branch a		ue issued by the bank)		<u>O</u>	
		ed code appearing on cheque lea	,	e to be directly credited	to my aforosaid P	lank Account *	
	•	all payments made to the insured		•	to my aforesald b	Parik Account .	
<u> </u>	on by Proposer	an paymonto mado to the modros	raro omy amough	cioca cine mede.			
this declard or alteration the content agree to achas arisen respect of details from RELIANCE received, Ir policy shall the declars contained previous in renewal no payment be represent a Companyo	ion shall form the basis as are carried out after ts of the form and docuscept a policy subject to in the expiring policy (cosection I of the policy wan my/our previous insuit General Insurance with the event this declarat stand automatically for ation from my/our previourerin and under the resurers, the "cash-less stice and pass on the say cheque/DD favouring tion, mis-description of the rother persons, files a lany fact material them	ments made by me/us in this Proof the contract between me/us at the submission of this proposal function have been fully explained the condition prescribed by the copy of the policy enclosed/) I/We full stand forfeited. I/We further univers. Pending receipt of necessal be liable to release the payme on is found to be incorrect, any afeited. Further, any survey arranious insurers, shall be without levant laws and regulations. I/We repair facility" provided by RELI ame to RELIANCE General Insug Reliance General Inurance (non-disclosure of any material paproposalto insurance containineto, commits a fraudulent act where the submission of the containing the committed in the containing the	and RELIANCE Grorm, then the san to me/us and tha company. I/We defurther undertake derstand and agrey confirmation, I/nt towards any cland all coverage aged/ allowed by Fprejudice to any e acknowledge an ANCE General Irurance immediate CO. Ltd. This poarticulars by the Pg any false inforr	eneral Insurance Comp ne would be conveyed to I I/We have fully unders clare that the rate of NC that, if this declaration is see that RELIANCE Gen- we agree that, though aims under section I of available under section I RELIANCE General Insu of the rights and reme- d agree that, Pending r insurance shall stand su ly upon the receipt of s licy shall be voidable oposer. Any person who	any Limited . I/Web the insurers imported the significated above be found to be incoeral Insurance will coverage under the policy only a of the policy from urance of the motidies available to eceipt of confirmates appended. I/We a uch renewal noticat the option of to knowingly and the purpose of motion of the purpose of	e also declare that , if any a nediately. I/ We hereby dec ance of the proposed contra y me/us is correct and that rrect, all benefits under the Il seek confirmation of above the policy will be available to fiter a confirmation in this real in the date of commenceme or vehicle, pending confirm RELIANCE General Insur- ation of the declaration from Iso shall endeavour to pro- ce. Mode of Payment: Sec the company in the event with intent to defraud the In hisleading, information, info	additions additions alare that act. I/We no claim policy in restated o o me/us, egard is not of the nation of ance as no my our cure the ure your commissurance or mation or mandion of missurance or mation.
This prop Name Date	osal form was complete	d by		Place Date			
	Signature			•	Signature of Pro	poser & Company seal	
Prohibition	on of Rebates - Sect	ion 41 of the Insurance Act,	, 1938 as amen	ded by Insurance La	aws (Amendme	ent) Act, 2015	
any kind nor shall	on shall allow or offer to of risk relating to liveso any person taking out of the insurer	allow, either directly or indirectly a properly in India, any rebate of the renewing or continuing a policy	as an inducement he whole or part c accept any rebate	to any person to take o of the commission payab as may be allowed in a	ut or renew or cor lleor any rebate o ccordance with th	ntinue an insurance in respe f the premium shown on the pe published prospectuses of	ect of e policy, or
2. Any pers	on making default in co	mplying with the provisions of this	s section shall be	liable for a penalty which	n may extend to te	en lakh repees.	
upporting	Confirmation of Ag	ent/Broker/SM/CSO					
I confirm	the above signature tob	e of the registered owner of the v		or insurance			
	RDAI Agent/ Broker	Mr. Mrs. CSC EGOVE	ERNANCE				
Place Date							
	of Direct Business, Nam	e & Signature of CSO /SM to be t	taken)				
					Signature of I	RDAL Agent/ Broker	